Best Available Copy												
4)							Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOIL Effective December 29, 1999							09 650 757					
CLAIMS AS FILED - PART I (Column 1) (Column 2)						_ I	SMALL I		OR	OTHER SMALL E		
FO	R	NUMBE	R FILED	NUMBER E	XTRA	ı	RATE	FEE		RATE	FEE	
BAS	SIC FEE	3.30	10 July 10 Jul					345.00	OR	4.0	690.00	
TOTAL CLAIMS		17	minus 20)= ·			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS		AIMS /	minus 3	.= .			X39=		оя	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	1	
* If the difference in column 1 is less than zero, enter "0" in column 2						'	TOTAL	 	OR	TOTAL	1.60	
CLAIMS AS AMENDED - PART II							TO THE		,	OTHER	THAN	
	3 Bot (Column 1) (Column 2) (Column 3)							ENTITY	OR	SMALL E	NTITY	
T		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. (0	Minus	20	=		X\$ 9=		OR	X\$18=		
ZEN	Independent	•	Minus	<u>3</u>	=/		X39=		OR	X78=	,	
لا	FIRST PRESE	NTATION OF MI	ULTIPLE DEPI	ENDENT CLAIM	(j	+130=		OR	+260=		
2 24 00-511							TOTAL			TOTAL ADDIT, FEE		
11-17-04 RCE TILED (Column 2) (Column 3)						,						
NTB .		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENOMENT	Total	- O	Minus	. 20	=6	1	X\$ 9=		OR	X\$18=	a	
EE.	Independent	1. 7	Minus	·· 3	-8]	X39=		OR	X78	a	
\$	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		1	30V	7	
							+130=		OR	L	13700	
							ADDIT. FEE		OR	ADDIT. FEE	P Flu	
L	Sandy and thought for the	(Column 1) CLAIMS	7	(Column 2) (Column 3) HIGHEST				1 4001	٦.		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL	
N N	Total		Minus	••	=		X\$ 9=		OR	X\$18=		
REN	Independent		Minus	•••	=	4	X39=	1	OR	X78=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					لـ	+130=	1	ОЯ			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"							TOTAL		OR	TOTAL		
	If the "Highest Nu	umber Previously	Paid For IN THE	IS SPACE IS less the IS SPACE is less the Independent) is the	han 3 ontor "3"		ADDIT. FEI ound in the a			ADDIT. FE		

FORM PTO-875 (Rev. 12/99)